Application or Docket Number (79/5/7 258

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

		Lilectiv	e Decem	04/517 258						
		CLAIMS AS	S FILED ·	SMA TYP	LL ENTITY	OR	OTHER SMALL	•		
FC	OR .	NUMBE	ER FILED	NUMBER	EXTRA	RAT	E FEE]	RATE	FEE
ВА	SIC FEE						345.00	OR		690.00
TOTAL CLAIMS 85 minus 20= * 65						X\$ 9	= 585.0	OR	X\$18=	
INDEPENDENT CLAIMS / minus 3 = * 7							= 223.00	1	V70	-
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT	120]				
* If	the difference	in column 1 is	less than z	+130	130,36	٠				
				TOTA	L 13330	JOH	TOTAL	THAN		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMA	LL ENTITY	OR	OTHER SMALL	
NDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	ADDI- E TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	•	Minus	**	=	X\$ 9	=	OR	X\$18=	
AME	Independent	*	Minus	***	=	X39=	=	OR	X78=	
 	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT CLAIM		+130		1	+260=	
						10		OR	TOTAL	
		(Column 1)		(Column 2)	(Column 3)	ADDIT. F	EE L	OR	ADDIT. FEE	
ПВ		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
MEN		AMENDMENT		PAID FOR			FEE			FEE
MENDMENT	Total	•	Minus	**	=	X\$ 9	=	OR	X\$18=	
AM	Independent	* NTATION OF MI	Minus	PENDENT CLAIM		X39=	=	OR	X78=	
						+130	=	OR	+260=	
						TÕI ADDIT. F		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)				- · · · · 	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	X\$ 9:	=	OR	X\$18=	
	Independent	•	Minus	***	=	X39=	:	OR	X78=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT CLAIM		+130		OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									TOTAL ADDIT. FEE	

^{***}If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/5

Total Fee Calculation

Total Fee Calculation										
	Fee Cade	Total # Claims	Number Extra	(Fce	Fee	= Total				
Basic Filing Fee Total Claims >20 Independent Claims >3 Mult. Dep Claim Present Surcharge English Translation	<u>205/105</u> <u>139</u>	<u>35</u> .20 • <u>10</u> .3 •		Sm. Entity 345,00 9,00 130.00	Lg. Entity	10(1)				
Fees due upon filing the						<u>1333,</u> 62				
Total Filing Fees Due =	s <u>13</u>	33.00								
Less Filing Fees Submit	ted - \$//	99.00								
BALANCE DUE	= \$ <u>13</u>	5.00								